AMENDMENT

In the Claims

Please amend the claims, without prejudice, as follows:

1-42. (Canceled).

43. (New) A method for treating a human subject afflicted with supraventricular tachyarrhythmia, comprising administering to the human subject a therapeutically effective amount of an agent which restores normal gating to a type 2 ryanodine receptor (RyR2) channel, thereby treating the human subject, wherein the agent is JTV-519.

44. (New) The method of claim 43, wherein the amount of the agent is from about 100 nM to about 1000 nM.

45. (New) The method of claim 43, wherein the administering is performed using a method selected from the group consisting of topical, intravenous, pericardial, oral, subcutaneous, and intraperitoneal administration.

46. (New) A method for treating a human subject afflicted with supraventricular tachyarrhythmia, comprising administering to the human subject a therapeutically effective amount of an agent which inhibits dissociation of FKBP12.6 from a type 2 ryanodine (RyR2) receptor, thereby treating the human subject, wherein the agent is JTV-519.

47. (New) The method of claim 46, wherein the amount of the agent is from about 100 nM to about 1000 nM.

48. (New) The method of claim 46, wherein the administering is performed using a method selected from the group consisting of topical, intravenous, pericardial, oral, subcutaneous, and intraperitoneal administration.

49. (New) A method for inhibiting the onset of supraventricular tachyarrhythmia in a human subject, comprising administering to the human subject a prophylactically

effective amount of an agent which restores normal gating to a type 2 ryanodine receptor (RyR2), thereby treating the human subject, wherein the agent is JTV-519.

50. (New) A method for inhibiting the onset of supraventricular tachyarrhythmia in a human subject, comprising administering to the human subject a prophylactically effective amount of an agent which inhibits dissociation of FKBP12.6 from a type 2 ryanodine (RyR2) receptor in, thereby inhibiting the onset of supraventricular tachyarrhythmia in the human subject, wherein the agent is JTV-519.

51. (New) The method of claim 50, wherein the amount of the agent is from about 100 nM to about 1000 nM.

52. (New) The method of claim 50, wherein the administering is performed using a method selected from the group consisting of topical, intravenous, pericardial, oral, subcutaneous, and intraperitoneal administration.

53. (New) A method for treating a human subject afflicted with supraventricular tachyarrhythmia, comprising administering to the human subject a therapeutically effective amount of an agent which enables FKBP12.6 to bind to PKA-phosphorylated type 2 ryanodine receptor (RyR2) channels, thereby treating the human subject, wherein the agent is JTV-519.

54. (New) The method of claim 53, wherein the amount of the agent is from about 100 nM to about 1000 nM.

55. (New) The method of claim 53, wherein the administering is performed using a method selected from the group consisting of topical, intravenous, pericardial, oral, subcutaneous, and intraperitoneal administration.

56. (New) A method for inhibiting the onset of supraventricular tachyarrhythmia in a human subject, comprising administering to the human subject a prophylactically effective amount of an agent which enables FKBP12.6 to bind to PKA-phosphorylated type 2 ryanodine receptor (RyR2) channels, thereby inhibiting the

onset of supraventricular tachyarrhythmia in the human subject, wherein the agent is JTV-519.

57. (New) The method of claim 56, wherein the amount of the agent is from about 100 nM to about 1000 nM.

58. (New) The method of claim 56, wherein the administering is performed using a method selected from the group consisting of topical, intravenous, pericardial, oral, subcutaneous, and intraperitoneal administration.

59. (New) A method for treating a human subject afflicted with supraventricular tachyarrhythmia, comprising administering to the human subject a therapeutically effective amount of JTV-519, thereby treating the human subject.

60. (New) The method of claim 59, wherein the amount of JTV-519 is from about 100 nM to about 1000 nM.

61. (New) The method of claim 59, wherein the administering is performed using a method selected from the group consisting of topical, intravenous, pericardial, oral, subcutaneous, and intraperitoneal administration.

62. (New) A method for inhibiting the onset of supraventricular tachyarrhythmia in a human subject, comprising administering to the human subject a prophylactically effective amount of JTV-519, thereby inhibiting the onset of supraventricular tachyarrhythmia in the human subject.

63. (New) The method of claim 62, wherein the amount of JTV-519 is from about 100 nM to about 1000 nM.

64. (New) The method of claim 62, wherein the administering is performed using a method selected from the group consisting of topical, intravenous, pericardial, oral, subcutaneous, and intraperitoneal administration.